

**Applicant Initiated Interview Request Form**Application No.: 10/717,028First Named Applicant: Bo LiExaminer: Connie P. JohnsonArt Unit: 1795Status of Application: Pending**Tentative Participants:**(1) Connie P. Johnson(2) Sandra P. Thompson

(3) \_\_\_\_\_

(4) \_\_\_\_\_

Proposed Date of Interview: \_\_\_\_\_

Proposed Time: \_\_\_\_\_ (AM/PM)

**Type of Interview Requested:**(1) ☒ Telephonic(2) ☐ Personal(3) ☐ Video ConferenceExhibit To Be Shown or Demonstrated: ☐ YES☐ NO

If yes, provide brief description: \_\_\_\_\_

**Issues To Be Discussed**

Issues (Rej., Obj., etc)	Claims/ Fig. #s	Prior Art	Discussed	Agreed	Not Agreed
(1) <u>Rej.</u>	<u>1, 3</u>	<u>2003/0091838</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) <u>Rej.</u>	<u>11-13, 18</u>	<u>2003/0091838</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3) <u>Rej.</u>	<u>26, 28-31</u>	<u>2003/0091838</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(4) <u>Rej.</u>	<u>37</u>	<u>2003/0091838</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☒ Continuation Sheet Attached☐ Proposed Amendment or Arguments Attached**Brief Description of Arguments to be Presented:**


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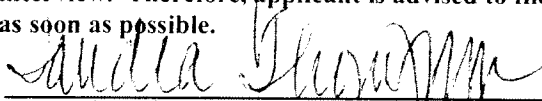


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An interview was conducted on the above-identified application on \_\_\_\_\_.

**NOTE:** This form should be completed by applicant and submitted to the examiner in advance of the interview (see MPEP § 713.01).

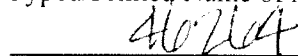
This application will not be delayed from issue because of applicant's failure to submit a written record of this interview. Therefore, applicant is advised to file a statement of the substance of this interview (37 CFR 1.133(b)) as soon as possible.



Applicant/Applicant's Representative Signature



Typed/Printed Name of Applicant or Representative



Registration Number, if applicable

Examiner/SPE Signature

This collection of information is required by 37 CFR 1.133. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

**Applicant Initiated Interview Request Form**

Application No.: 10/717,028 First Named Applicant: Bo Li  
 Examiner: Connie P. Johnson Art Unit: 1795 Status of Application: Pending

**Tentative Participants:**

(1) Connie P. Johnson (2) Sandra P. Thompson  
 (3) \_\_\_\_\_ (4) \_\_\_\_\_

Proposed Date of Interview: \_\_\_\_\_ Proposed Time: \_\_\_\_\_ (AM/PM)

**Type of Interview Requested:**

(1) ☒ Telephonic (2) ☐ Personal (3) ☐ Video Conference

Exhibit To Be Shown or Demonstrated: ☐ YES ☐ NO

If yes, provide brief description: \_\_\_\_\_

**Issues To Be Discussed**

Issues (Rej., Obj., etc)	Claims/ Fig. #s	Prior Art	Discussed	Agreed	Not Agreed
(1) <u>Rej.</u>	<u>1, 3, 6</u>	<u>6506497</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) <u>Rej.</u>	<u>11-15</u>	<u>6506497</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3) <u>Rej.</u>	<u>37, 59</u>	<u>6506497</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(4) <u>Rej.</u>	<u>1, 3, 6</u>	<u>WO 03/08834</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☒ Continuation Sheet Attached

☐ Proposed Amendment or Arguments Attached

**Brief Description of Arguments to be Presented:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

An interview was conducted on the above-identified application on \_\_\_\_\_.

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Sandra Thompson  
 Applicant/Applicant's Representative Signature

\_\_\_\_\_  
 Examiner/SPE Signature

Sandra Thompson  
 Typed/Printed Name of Applicant or Representative

46214  
 Registration Number, if applicable

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**Applicant Initiated Interview Request Form**

Application No.: 10/717,028 First Named Applicant: Bo Li  
 Examiner: Connie P. Johnson Art Unit: 1795 Status of Application: Pending

**Tentative Participants:**

(1) Connie P. Johnson (2) Sandra P. Thompson  
 (3) \_\_\_\_\_ (4) \_\_\_\_\_

Proposed Date of Interview: \_\_\_\_\_ Proposed Time: \_\_\_\_\_ (AM/PM)

**Type of Interview Requested:**

(1) ☒ Telephonic (2) ☐ Personal (3) ☐ Video Conference

Exhibit To Be Shown or Demonstrated: ☐ YES ☐ NO

If yes, provide brief description: \_\_\_\_\_

**Issues To Be Discussed**

Issues (Rej., Obj., etc)	Claims/ Fig. #s	Prior Art	Discussed	Agreed	Not Agreed
(1) <u>Rej.</u>	<u>11-15, 27</u>	<u>WO 03/088343</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) <u>Rej.</u>	<u>29-31, 59</u>	<u>WO 03/088343</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3) <u>Rej.</u>	<u>1, 3, 6</u>	<u>2007/027213</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(4) <u>Rej.</u>	<u>11-15</u>	<u>2007/027213</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☒ Continuation Sheet Attached

☐ Proposed Amendment or Arguments Attached

**Brief Description of Arguments to be Presented:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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*Sandra Thompson*

Applicant/Applicant's Representative Signature

Examiner/SPE Signature

*Sandra Thompson*

Typed/Printed Name of Applicant or Representative

*46264*

Registration Number, if applicable

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**Applicant Initiated Interview Request Form**Application No.: 10/717,028  
Examiner: Connie P. JohnsonFirst Named Applicant: Bo LiArt Unit: 1795Status of Application: Pending**Tentative Participants:**(1) Connie P. Johnson(2) Sandra P. Thompson

(3) \_\_\_\_\_

(4) \_\_\_\_\_

Proposed Date of Interview: \_\_\_\_\_

Proposed Time: \_\_\_\_\_ (AM/PM)

**Type of Interview Requested:**(1) ☒ Telephonic(2) ☐ Personal(3) ☐ Video ConferenceExhibit To Be Shown or Demonstrated: ☐ YES☐ NO

If yes, provide brief description: \_\_\_\_\_

**Issues To Be Discussed**

Issues (Rej., Obj., etc)	Claims/ Fig. #s	Prior Art	Discussed	Agreed	Not Agreed
(1) <u>Rej.</u>	<u>27,29-31</u>	<u>2007/027213</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) <u>Rej.</u>	<u>59</u>	<u>2007/027213</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3) <u>Rej.</u>	<u>1, 27</u>	<u>2009/0029145</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(4) <u>Rej.</u>	<u>29-31</u>	<u>2009/0029145</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☒ Continuation Sheet Attached☐ Proposed Amendment or Arguments Attached**Brief Description of Arguments to be Presented:**


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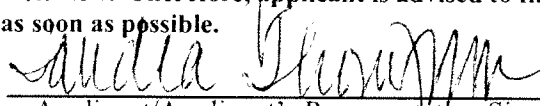


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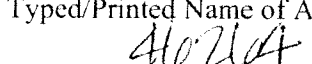
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 Applicant/Applicant's Representative Signature

Examiner/SPE Signature

  
 Typed/Printed Name of Applicant or Representative

  
 Registration Number, if applicable

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**Applicant Initiated Interview Request Form**Application No.: 10/717,028  
Examiner: Connie P. JohnsonFirst Named Applicant: Bo Li  
Art Unit: 1795 Status of Application: Pending**Tentative Participants:**(1) Connie P. Johnson (2) Sandra P. Thompson  
(3) (4)

Proposed Date of Interview: Proposed Time: (AM/PM)

**Type of Interview Requested:**(1) ☒ Telephonic (2) ☐ Personal (3) ☐ Video ConferenceExhibit To Be Shown or Demonstrated: ☐ YES ☐ NO

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**Issues To Be Discussed**

Issues (Rej., Obj., etc)	Claims/ Fig. #s	Prior Art	Discussed	Agreed	Not Agreed
(1) Rej.	1, 3	667392	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) Rej.	11-13, 18	667392	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3) Rej.	26, 28-31	667392	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(4) Rej.	28-31, 37	6677392	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☒ Continuation Sheet Attached☐ Proposed Amendment or Arguments Attached**Brief Description of Arguments to be Presented:**

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**Applicant Initiated Interview Request Form**

Application No.: 10/717,028 First Named Applicant: Bo Li  
 Examiner: Connie P. Johnson Art Unit: 1795 Status of Application: Pending

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Issues (Rej., Obj., etc)	Claims/ Fig. #s	Prior Art	Discussed	Agreed	Not Agreed
(1) <u>Rej.</u>	<u>1, 3</u>	<u>2002/0068181</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) <u>Rej.</u>	<u>11-13, 18</u>	<u>2002/0068181</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3) <u>Rej.</u>	<u>26, 28-31</u>	<u>2002/0068181</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(4) <u>Rej.</u>	<u>37</u>	<u>2002/0068181</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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*Sandra Thompson*

Applicant/Applicant's Representative Signature

Examiner/SPE Signature

*Sandra Thompson*  
 Typed/Printed Name of Applicant or Representative

*462164*  
 Registration Number, if applicable

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**Applicant Initiated Interview Request Form**

Application No.: 10/717,028 First Named Applicant: Bo Li  
 Examiner: Connie P. Johnson Art Unit: 1795 Status of Application: Pending

**Tentative Participants:**

(1) Connie P. Johnson (2) Sandra P. Thompson  
 (3) \_\_\_\_\_ (4) \_\_\_\_\_

Proposed Date of Interview: \_\_\_\_\_ Proposed Time: \_\_\_\_\_ (AM/PM)

**Type of Interview Requested:**

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Issues (Rej., Obj., etc)	Claims/ Fig. #s	Prior Art	Discussed	Agreed	Not Agreed
(1) <u>Rej.</u>	<u>1, 37</u>	<u>2004/0166434</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(4) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Applicant/Applicant's Representative Signature

Examiner/SPE Signature

Sandra Thompson  
 Typed/Printed Name of Applicant or Representative

46264  
 Registration Number, if applicable

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